Utah Health Information Technology Strategic Plan 2016-2020

A Collaborative Planning Document

By

Utah Digital Health Service Commission (UDHSC)
Comagine Health – Utah
Utah Health Information Network (UHIN)
Utah Partnership for Value-driven Health Care (UPV)
Utah Department of Health (UDOH)

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Health and Health Information Technology (IT) Visions

<u>Our statewide health vision</u> is for Utah to be a place where *all* people can enjoy the best health possible, where *all* can live and thrive in healthy and safe communities. https://health.utah.gov/

<u>Our statewide vision for health IT</u> is for Utah to be a place where the secure and efficient use and exchange of electronic health information will result in improved health status, better health care, lower cost and healthier communities.

Health IT Guiding Principles

Utah has made significant progress in adoption electronic health records (EHR) and clinical health information exchanges (HIE) since 2005. In 2016-2020, Utah will move forward under following **guiding principles**:

- Continue to foster *statewide collaboration* with all partners
- *Leverage the market* and existing HIT infrastructures
- Encourage interoperability and portability across care settings through *multi-level or modular advancements*
- Protect *privacy and security* in all aspects of IT and its uses
- Enhance consumer engagement
- Share meaningful health information among *learning health systems* to ensure innovation, quality, safety and value in health care.
- Using health IT to strengthen health of individuals, families, communities and add value to Utah's economy.

State HIT Plan History

- 2013 State Innovation Model Grant funded planning for statewide IT initiatives. Commission's chair co-chaired these efforts
- 2015 Commission updated the Utah Health IT Vision, Principles and Priorities
- 2016 the Commission led the developed and oversight of the first Utah's Health IT Strategic Plan (2016-2020) as well as Performance measures
- 2017 Updated State HIT plan to align with ONC National HIT Strategic Plan
- 2018 Updated plan with current and potential projects and established goal review and measurement dashboard cycle.
 - o January Goal deep dive
 - March Review dashboard and plan changes
 - o May Goal deep dive
 - o July Vote on plan changes, Goal deep dive
 - August UDOH presents HIT plan to Medicaid for inclusion in Medicaid updates
 - o September Review dashboard
 - o November Goal deep dive
- 2019-Reviewed each goal, objective, and project

Priority Framework for Health IT

Utah health IT priority is to improve system interoperability and portability to support integration of physical and behavioral health care and improve population health for all Utahans.

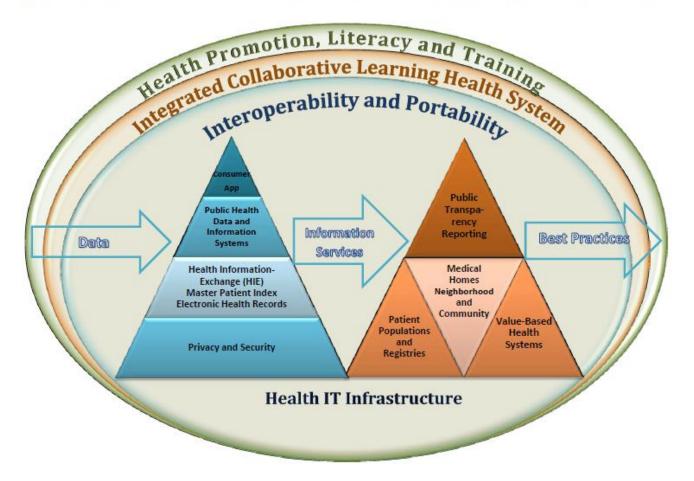
The Priority Framework of Health IT for Population Health and a Statewide Learning Health System in *Utah* (See Figure 1) describes the relationship of various health IT components, health data uses and statewide initiatives as follows:

- The left pyramid includes core IT applications that were identified in our statewide IT architecture design for 2009-2014 efforts.
- The Health IT systems provide information services for multi-level information uses ranging from care provided in medical home, neighborhood and communities to patient registries, value-based health systems, as well as public transparency reporting (the right pyramid).
- Interoperability and portability are key functions among all IT applications and infrastructure, services, and connections to health data users.
- Health IT must support an integrated collaborative learning health system.
- Health IT must improve efficiency of health promotion and enhance health IT literacy and training.

Education

Members of the Digital Health Service Commission will consider a process to help inform and better prepare both the public and health care providers on how to more fully access and use these resources that result from the plan projects.

Figure 1. Priority Framework of Health IT for Population Health and a Statewide Learning Health System in Utah



Utah Health IT Status:

Below is summary information on Utah statewide health IT performance in comparison with the national average. The data source for these indicators is from the web site of U.S. Department of Health and Human Service National Office of Coordinator for Health IT at http://healthit.gov.

Utah Health IT Status and Alignment with the Office of the National Coordinator in 2018

The national direction for Health Information Technology advances interoperability and encourages provider connectivity with others as a core metric in the 2018 CMS Quality Payment Program (QPP). "Promoting Interoperability (PI)" focuses on "interoperability, improving flexibility, relieving burden". See https://qpp.cms.gov/mips/promoting-interoperability.

As of Summer 2018 the initial submissions to the QPP by providers for 2017 are final and we anticipate high-level if not state by state benchmarks on participation. This document will be updated as national benchmarks occur to further inform Utah's participation and any gaps that may be addressed by the State HIT plan.

Utah Health IT Summary

This table shows how Utah compares to the national average on measures of HIT adoption and utilization that have been updated within the past two years. Data was obtained from the Office of the National Coordinator (https://dashboard.healthit.gov/apps/health-information-technology-data-summaries.php). While Utah appears to be performing well regarding hospital adoption of health IT, office physician adoption of health IT appears to be lagging.

Utah Health IT Summary			Recent			
Domain	Setting	Measure	Year Na	tl Avg Ut	ah (Compare
EHR Adoptions	Hospitals	Adopted Certified EHRs	2017	96%	97%	1
	Physicians	Adopted Any EHRs	2017	86%	94%	1
	Physicians	Adopted Certified EHRs	2017	80%	85%	1
Certified IT Vendors	Hospitals	Reported Certified Health IT Vendor(2014)	2017	96%	95%	4
	Professiona	ls Reported Certified Health IT Vendor(2014)	2017	81%	71%	4
Electronic Prescribing		No recent data				
Exchange & Interoperability		Electronically Send from Outside Health				
	Hospitals	Providers	2017	88%	91%	↑
		Electronically Receive from Outside Health	2017	7.40/	020/	•
	Hospitals	Providers Electronically Find from Outside Health	2017	74%	82%	1
	Hospitals	Providers	2017	61%	84%	1
		Electronically Integrate from Outside Health				•
	Hospitals	Providers	2017	53%	79%	1
	·	All Domains Electronically from Outside				
	Hospitals	Health Providers	2017	41%	75%	1
		Electronically Send from Outside Health				
	Physicians	Providers	2017	36%	25%	$\mathbf{\downarrow}$
		Electronically Receive from Outside Health				
	Physicians	Providers	2017	38%	31%	\P
		Electronically Find from Outside Health				
	Physicians	Providers	2017	53%	49%	$\mathbf{\downarrow}$
		Electronically Integrate from Outside Health				
	Physicians	Providers	2017	28%	22%	V
		Electronically Send or Receive from Any				
	Physicians	Health Provider	2017	46%	43%	\Psi
	D I	Electronically Send from Any Health	2047	260/	250/	
	Physicians	Provider Electronically Receive from Any Health	2017	36%	25%	V
	Physicians	Provider	2017	38%	31%	4
HITECH Programs	Filysicians	No recent data	2017	3070	31/0	
THE COLL LOGICALIS		Provided Electronic Capabilities to Patients-				
Patient Engagement	Hospitals	API Access	2017	38%	54%	1
	Hospitals	Provided Electronic Capabilities to Patients-	2017	3070	3-70	
	Physicians	Secure Messaging	2017	68%	65%	4
Public Health Reporting	,	No recent data	-			•

Utah Health IT Strategic Goals and Objectives in 2016 - 2020:

GOAL 1: ADVANCE THE HEALTH AND WELL-BEING OF INDIVIDUALS AND COMMUNITIES THROUGH PERSON-CENTERED AND SELF-MANAGED HEALTH

OBJECTIVES:

- **1A.** Increase use of individual health information for engagement and shared decision making as part of the team Enable individuals to understand and act upon available cost and quality information
- 1B. Advance individuals' abilities to "access, control and amend" their health information
- **1C.** Increase adoption and use of patient portals and consumer-focused HIT
- **1D.** Promote patient education and use of HIT tools for wellness and self-care
- **1E.** Increase effective patient/consumer-mediated and generated exchange
- **1F.** Advance individual's access to and appropriate sharing of public health data

GOAL 2: STRENGTHEN HEALTH CARE DELIVERY TRANSFORMATION OBJECTIVES:

- **2A.** Increase HIT functions to support transparency of and access to quality and cost information at the community and provider level to improve care
- **2B.** Increase implementation of HIT functions to support innovative models of care that promote high-value health care Medical Home, ACOs, Telehealth
- **2C.** Increase use of electronic quality improvement tools and measurements that support provider adherence to evidence-based guidelines, improved outcomes and reduced waste
- **2D.** Support the use of health IT to help providers and communities to better serve high-risk individuals and populations

GOAL 3: ENHANCE UTAH'S INTEROPERABLE HEALTH IT INFRASTRUCTURE OBIECTIVES:

- **3A.** Endorse basic guidelines for HIT standards that align with and strengthen national certification requirements, including interoperability, to increase effective health information exchange
- **3B.** Protect privacy and security of electronic health information by increasing adherence to federal electronic health information security guidelines in independent facilities and practices
- **3C.** Increase functionality and effectiveness of state-wide HIE (CHIE) and support increased connections with other data sources including integrated delivery systems (IDS), HIEs, and providers.
- **3D.** Increase ability to exchange public health information with providers through various exchange methods to improve population health
- **3E.** Develop governance, access, and support for health data to be made available for analysis and use
- **3F.** Increase Utah's influence on the national forums related to effective delivery of care through HIT
- **3G.** DHSC will attend conferences to promote interoperability work.

GOAL 4: SUPPORT INNOVATION AND APPLIED RESEARCH TO EFFICIENTLY IMPLEMENT STATEWIDE HEALTH IT INITIATIVES

OBJECTIVES:

- **4A.** Promote collaborative innovation and research to advance implementation, utilization and improvement of health IT in public, private and academic settings
- **4B.** Broaden statewide partnership and engagement in implementing the Utah HIT strategic plan
- 4C. Disseminate evidence-based best practices to enhance statewide adoption of technology solutions

Definitions of ACTIONS:

Expansion- A project currently implemented but needing to expand to a larger audience or expand services.

Gap- No identified state level activities.

Implementation- A project that has designated resources and defined scope and is in progress. **Needs resources**- A project that has been either planned and/or implemented but needs additional resources to move forward.

Planning- A project in concept development but lacks resources to advance to implementation or expansion status.

Descriptions of Projects/Strategies:

PROJECTS FOCUSED ON PATIENT KNOWLEDGE AND INVOLVEMENT

• APCD (Price Transparency) & NRHI Total Cost of Care

Action: Implementation Primary: UDOH- OHCS, Comagine Health Goals/Objectives Supported: 1A, 2A

To increase transparency reporting on healthcare quality and cost using the All Payer Claims Data or Total Cost of Care Data. (Baseline online report = 2; Baseline online query tool = 2)

UtahHealthScape.org (Transparency for Consumers)

Action: Implementation Primary: Comagine Health, UDOH-OHCS
Goals/Objectives Supported: 1A, 2AUtahHealthScape.org provides health care consumers
with resources to support informed decision-making. UtahHealthScape provides a directory of
providers and clinics and quality ratings for hospitals, health plans, nursing homes, and home
health agencies, along with other valuable information.

• Comagine Health's Patient & Family Advisory Council and state-wide PFAC Consortium Action: Expansion Primary: Comagine Health

Goals/Objectives Supported: 1A, 1C

Comagine Health's Patient & Family Advisory Council (PFAC) helps us better understand the health care system from the patient's viewpoint. Patients, families and caregivers participating in the PFAC share their personal stories and health care experiences. This patient input is important in influencing how we design our projects to make our health care system better. We believe that patient wisdom is a "must have" factor in improving health care. Comagine Health convenes patient and family advisories throughout the state and HIT is a topic of interest, specifically Open Notes and portal use, for engagement and efficiency of care.

ePOLST Analysis and Implementation

Action: Planning/Needs Resources Primary: UDOH, UHIN

Goals/Objectives Supported: 1A, 1B, 1C

Started: 10/2017

Consensus built stakeholder recommendations on how to move forward in establishing an ePOLST registry, supporting the registry and implementing it throughout the state.

• Planning project for 1D - Promote patient use of HIT Action: Gap Primary: UDOH

Goals/Objectives Supported: 1D

Recognize gap. No current activity at this time.

Planning project for 1E - Consumer-mediated/generated exchange

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 1E

Started: 11/2015

CHIE has a limited pilot on the patient portal with planned expansion.

• CHIE Patient Portal

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 1A, 1B, 2C

Started: 11/2015

This is an ONC grant item that created a patient portal that has access to the CHIE and allows for patient to share information with their provider. Planning to add ePOLST and Pediatric Care Summary data for patient access. Future roadmap items include benefit information, immunizations and care plans.

Open Notes Campaign

Action: Expansion Primary: UPV-Comagine Health, UHIN, UHIMSS

Goals/Objectives Supported: 1A, 1B, 1C, 1E, 3C

Started: 11/2017

Open Notes is a movement that urges doctors, nurses, therapists, and others to invite patients to read the notes they write to describe a visit through sharing from an electronic health record portal. Utah has a number of systems using electronic health records that can make notes available. Initiatives to increase patient awareness and use can impact patient safety as well as trust between providers and patients. Goal is to increase participants in the Open Notes Initiative.

Patient Consent

Action: Planning Primary: UHIN

Goals/Objectives Supported: 1A, 1C, 1E, 2B, 3C

Started: 9/2011

Develop patient consent tools for consent designation for sharing information across HIPAA and non-HIPAA providers.

• Utah Department of Technology Services Digital Citizen Integration Project.

Action: Planning Primary: DTS Goals/Objectives Supported: 1A, 1C, 1F

Develop single sign on for citizens to access state services and records related to them. Result of SB 137 (2019)

PROJECTS FOCUES ON HEALTH CARE DELIVERY TRANSFORMATION

Provide Support for Quality Reporting (PQRS, MU, MACRA)

Action: Implementation Primary: Comagine Health and UHIN

Goals/Objectives Supported: 1C, 1A, 2B

Started: 1/2009

Comagine Health gives quality improvement support to Utah physician offices and hospitals on reporting and improving quality measures. Specific emphasis on the Quality Payment Program (QPP), Accountable Care Organizations (ACOs), other Alternative Payment Models (APMs), behavioral health care and Ambulatory Surgical Center care are a focus for improvement efforts and improving outcomes. UHIN is working with providers to meet Promoting Interoperability (previously Meaningful Use) requirements and assist with criteria for QPP and is evaluating whether to assist members with reporting.

GetHealthyUtah.org (Population Health)

Action: Implementation Primary: Utah Leaders for Health

Goals/Objectives Supported: 2B, 2C, 2D

To improve the health of all Utahns by supporting healthy eating and active living in order to associated health consequences.

Death Notifications

Action: Expansion Primary: UDOH

Goals/Objectives Supported: 2B, 2D

To develop timely notifications of deceased patients or members to providers and payers for them to improve their population health data.

• Long-Term/Post-Acute Care Summary Exchange

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 2B, 3C

Started: 11/2015

This is an ONC project intended to exchange CCD documents between hospital and long term care providers. The pilot effort included Avalon and Intermountain Healthcare. The expansion effort is to include all LTCs and Hospitals.

• Dashboards (HIT, NQF, Monarch) for Geographic Quality Analysis

Action: Expansion Primary: UHIN, UDOH

Goals/Objectives Supported: 2C, 2D

Started: 12/2015

This project intends to provide hot spotting to providers for their patient panels and for public health reporting. There are currently 36 measures contained in the system.

• Adult Immunizations - increase rates (flu, pneumonia)

Action: Implementation Primary: Comagine Health, UDOH-USIIS

Goals/Objectives Supported: 2C

Working with organizations to help improve the assessment and documentation of Medicare beneficiaries' immunization status, increase overall immunization rates and reduce immunization disparities.

• Comagine Health's Quality Awards Program

Action: Expansion Primary: Comagine Health

Goals/Objectives Supported: 2B, 2C

The Comagine Health Quality Award Program was launched in 2004 to promote high quality and transparency in health care. Yearly awards are given to Utah health care provider organizations based on standardized criteria (including Health IT) in the following areas:

• Home Health

- Hospital
- Nursing Home
- Physician Office

ADT Alerts for reducing admissions and readmission

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Started: 9/2013

Encounter Notification Services for the community and pushing those to different endpoints to rural and out of state providers.

Clinical information exchange among public health, EHRs, and HIE

Action: Expansion Primary: UDOH-DCP, UHIN

Goals/Objectives Supported: 2A, 2C, 3D

Started: 1/2009

To expand clinical data exchanges between HIE, EHRs and public health programs to support population health improvements (Baseline on operational use cases = 3, Immunization, EHR, and Syndromic Surveillance). Expanding to Newborn Screening and planning for cancer registry.

• Obesity & Diabetes Population Health

Action: Implementation Primary: UDOH, UHIN

Goals/Objectives Supported: 2B, 2C, 2D

Started: 12/2015

Baseline measures of obesity and diabetes using clinical data stream are obtained from the CHIE.

• COB Database - Payer coordination

Action: Planning Primary: UHIN

Goals/Objectives Supported: 2Ac

Started: 1/2014

Working with community payers to improve the Coordination of Benefits. Updating Process

with new APCD Vendor

• Fall Prevention Initiative

Action: Planning/Needs Resources Primary: UDOH, UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Started: 9/2017

This initiative is based on legislative interest. It is to explore using EMS data to identify and alert providers/Aging Services on patients with the potential for falls so that they can follow up. This project also entails exploring ability to share information with social services agencies.

Shared Care Plan

Action: Planning Primary: UDOH, UHIN, UHPP

Goals/Objectives Supported: 2B, 2D, 3C

Started: 10/2017

This project is to enable sharing of care plans across disparate providers to enhance care coordination. This includes behavioral health care plans and referrals for vulnerable populations.

Home Health Hub

Action: Planning/Needs Resources Primary: UDOH, UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Started: 2/2018

Using HIT for Home Health Orders to increase timeliness of care. Would allow for electronic signatures on orders.

Social Service Referrals - Addressing social determinants in healthcare

Action: Planning Primary: UDOH, UHIN, United Way

Goals/Objectives Supported: 2B, 2D, 3C

Started: 9/2018

Have assessments in primary care and developing the ability of primary care to refer to 211 and then having the referral report back to the provider through the CHIE.

• Pharmacy integration medication reconciliation

Action: Planning Primary: UHIN, Comagine Health

Goals/Objectives Supported: 2B, 2D, 3C

Started: 1/2009

Integrating pharmacy data into the CHIE for medication reconciliation of non-controlled substance medication.

• State telehealth capacity for primary care and public health service delivery -

Action: planning Primary: UDOH EPICC and MCH

Goals/Objectives Supported: 2D

Assess capacity and needed development for delivery of health care services via telehealth, focused on primary care at this time. UDOH EPICC's workplan activities include working towards establishing and expanding the use of telehealth technology to increase access to DSMES programs. Additionally staff are working with LHDs to conduct an inventory of current providers using telehealth mechanisms to provide DSMES and/or diabetes education services and explore systems/software and equipment necessary for providing DSMES telehealth services. UDOH MCH

Has a telemental health pilot contract with the University of Utah that will be extended with some legislative funding. UDOH also has a statewide safety bundle initiative that is being implemented through Project ECHO

PROJECTS FOCUSED ON ENHANCING UTAH'S INTEROPERABLE HEALTH IT INFRASTRUCTURE

Rural Community Connectivity to CHIE

Action: Implementation Primary: UHIN

Goals/Objectives Supported: 2B, 2D, 3C

Started: 1/2009

Increase usage and participation in the CHIE. There has been much progress on this. There are four rural hospitals that still need to connect.

Bi-directional Immunization Query through CHIE

Action: Implementation Primary: UHIN, UDOH-USIIS

Goals/Objectives Supported: 3C, 3D

Started: 1/2009

CHIE and the Utah Statewide Immunization Information System (USIIS) will develop a bidirectional immunization query through CHIE for CHIE providers to query USIIS for patient immunization histories.

• EMS Integration exchange with CHIE

Action: Implementation Primary: UHIN

Goals/Objectives Supported: 3C

Started: 11/2015

Create an interface for EMS providers to query for information from their patients.

• Patient Centered Data Home - Multi-HIE Connections

Action: Implementation Primary: UHIN

Goals/Objectives Supported: 3C

Started: 1/2016

In production with 16 states including Alabama, Arizona, Arkansas, California, Colorado, Idaho, Indiana, Kentucky, Michigan, Nebraska, Nevada, Ohio, Oklahoma, Oregon, Tennessee, and Washington. In process with 5 additional states including Alaska, Iowa, Louisiana, North Dakota, and Texas.

Poison Control Center Data Integration

Action: Implementation Primary: UHIN, UDOH

Goals/Objectives Supported: 3C

Started: 11/2015

This is to get records in the hands of poison control to facilitate continuity of care. This project will work towards all referred hospitals receiving intake information gathered from the Poison Control center as well as follow up information sent back to the Poison Control Center for training and quality assessment. This is an expanded project from the initial work with St. Marks and Intermountain.

• The Shared Identity Services for Utahns (ThSisU) / Statewide MPI

Action: Implementation Primary: UDOH, Comagine Health, UHIN, Intermountain

Goals/Objectives Supported: 1E, 3A, 3D, 3E

Started: 7/2015

To develop a statewide and community-based identity validation services for improving quality of health services and reducing abuse, misuses, and cost. (Baseline = 0)

EHR, HIE connections to the Controlled Substance Database

Action: Implementation Primary: DOPL, UDOH, UHIN

Goals/Objectives Supported: 3B, 3C, 3D

Started: 11/2017

To develop connectivity among the Utah Controlled Substance Database (CSD) with EHRs, the CHIE, pharmacies to increase and improve the uses of CSD for reducing the opioids overdoes prescriptions and deaths. (Baseline = 0)

• UHIN HIT Conference

Action: Implementation Primary: UHIN Goals/Objectives Supported: 2D, 3A, 3B, 3F, 4A

Started: 11/2017

Annual educational community- based conference.

• CHIE Adoption

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 2B, 3C

Started: 1/2009

Increase the usage and participation in the CHIE.

CHIE Connections

Action: Expansion Primary: UHIN, UDOH

Goals/Objectives Supported: 3C

Started: 11/2015

Improved CHIE with behavioral health providers, SNF Home Health and EMS.

• Statewide Stroke and Cardiac Registries

Action: Planning Primary: UHIN, UDOH, Health Insight

Goals/Objectives Supported: 3C, 3D

Started: 1/2018

These new registries are required by recent legislation. UDOH is exploring utilizing UHIN to receive hospital reporting to the statewide stroke and cardiac registries through CHIE.

• Statewide Standards for Data Quality

Action: Planning Primary: UHIN, UDOH, Health Insight, ThSisU

Goals/Objectives Supported: 2A, 3A, 3E, 4A

Started: 1/2009

Establish and implement standards for health data exchanges, building on ONC's standards.

Deploy tools to clean data for analytics.

• HIE for Newborn Screenings and Follow up

Action: Implementation Primary: UDOH, UHIN

Goals/Objectives Supported: 1A, 2B

Started: 11/2015

To develop capacity to exchange newborn screening results and follow-up diagnostic reports between public health and providers via CHIE (Baseline = 0).

Physical and Behavioral Health Interoperability (electronic exchange - PCP to BH and BH to PCP)

Action: Expansion Primary: UHIN

Goals/Objectives Supported: 1A, 2B

Started: 8/2016

This project intends to exchange needed healthcare information between behavioral health and physical health providers. As of August 2016, UHIN is working with pediatric groups at Granger and the University Neuropsychiatric Institute. UHIN is piloting the updated SAMHSA consent with adult groups at Davis Behavioral Health.

• Use of EHR and/or PCORnet data for chronic disease surveillance by pubic health

Action: Planning Primary: UDOH-DCP, CHDI, UHIN Intermountain,

University of Utah

Goals/Objectives Supported: 2c, 3D, 3E

Started: 6/2018

The Bureau of Health Promotion within DCP has been evaluating the efficacy of EHR data for chronic disease surveillance and informing public health intervention and prevention efforts. The plan is to evaluate the PCORnet Common Data Model as a potential data model for statewide chronic disease surveillance, specifically hypertension and diabetes. UDOH collaborates with the Intermountain and the University of Utah's academic clinical databases ("PCORnet" Projects) to assist UHIN to develop a PCORnet compatible database and enable clinical information exchange among the three PCORnet's nodes. Initial clinical information to be exchanged is related to hypertension and hypertension-related diseases. This initiative is to support the Utah Governor's Legacy Project to reduce uncontrolled hypertension in Utah. Data sharing agreements have been completed and they are working on a one-time data transfer for the evaluation.

 Development of system to implement Medical Cannabis, including inventory control system, pharmacy, and electronic verification

Action: Implementation Primary: UDOH-Center for Medical Cannabis Goals/Objectives Supported: 2D, 3D

The Center for Medical Cannabis is working on an RFP that will address the multiple needs to implement Medical Cannabis through an interoperable system.

• Development of Controlled Substance Database dashboards including a provider, patient, and public dashboard

Action: Implementation Primary: UDOH, DOPL

Goals/Objectives Supported: 2D, 3D

UDOH is working with DOPL to create dashboards to inform providers of patient history with opioids, opioid/benzodiazepine combinations, and their own prescribing practices. They are also creating a public dashboard to identify hotspot areas.

PROJECTS FOCUSING ON INNOVATION AND APPLIED RESEARCH TO EFFICIENTLY IMPLEMENT STATEWIDE HEALTH IT INITIATIVES

• Utah Partnership for Value

Action: Expansion Primary: Comagine Health

Goals/Objectives Supported: 4A, 4B

The Utah Partnership for Value-driven Health Care (UPV) operates under a collaborative, member-driven process. Partners come to the table to identify needed changes to the health care system. The work of the UPV is accomplished through member-led workgroups related to topics and initiatives identified by the collaborative.

• Provider Directory

Action: Implementation Primary: UHIN, UDOH-HIP

Goals/Objectives Supported: 4A

Started: 11/2015

To develop interoperable health professional directories among providers, payers, HIE and UDOH to support secured message exchanges, patient-provider mapping, clinic-level

intervention, etc. (Baseline = 0)

Stakeholder Engagement (ie. Indian Health)

Action: Implementation Primary: UHIN, UDOH, Tribal Epidemiology Centers

Goals/Objectives Supported: 4B

Started: 9/2011

Improved connections for Indian Health providers for information exchange and population health management.

Partnering for Better Health Research Conference

Action: Need Resources Primary: Comagine Health

Goals/Objectives Supported: 4A

Intermountain Healthcare, Comagine Health, University of Utah Center for Clinical and Translational Sciences, and Community Faces of Utah host an innovative conference to improve UT patient engagement and patient centered outcomes research. Participants will engage in breakout sessions to address health sciences research questions as well as provide community member input into research design, inquiry and ongoing participation.

• Highlights of ongoing transparency, quality or research projects or All Payer Claims Database (APCD) use cases (e.g., UDRC

Action: Implementation Primary: UDOH

Goals/Objectives Supported: 4A

Yearly showcase events, products or publications highlighting new transparency, quality, or research projects. The Office of Healthcare Statistics shares new or updated uses of APCD data.

Measures

The Digital Health Service Commission will establish measures and a reporting dashboard to review progress on the projects in this plan.

Appendix A – Acronym List

ACO - Accountable Care Organization

ADT – Admissions, Discharges, and Transfers electronic HL7 messages

APCD – All Payer Claims Database

CHIE - Clinical Health Information Exchange. Utah's HIE.

EHR - Electronic Health Records

ePOLST - Electronic Physician's Orders for Life-Sustaining Treatment

HIE - Health Information Exchange

HIT - Health Information Technology

HITECH - Health Information Technology for Economic and Clinical Health

HL7 – Health Level-7 are international standards for transfer of clinical and administrative health data between software applications.

IT - Information Technology

MACRA - Medicare Access and CHIP Reauthorization Act

MU - Meaningful Use

NQF - National Quality Forum

OHCS - Office of Healthcare Statistics

OVRS - Office of Vital Records and Statistics

PCORI - Patient-Centered Outcomes Research Institute

PFAC - Comagine Health's Patient & Family Advisory Council

PQRS - Physician Quality Reporting System

UDOH - Utah Department of Health

UHIN - Utah Health Information Network

UPV - Utah Partnership for Value-driven Health Care

USIIS - Utah Statewide Immunization Information System

Appendix B – Completed Projects

• Choosing Wisely Campaign (informed patient)

Action: COMPLETED Primary: Comagine Health

Related Goals/Objectives: 1A

Choosing Wisely Utah is a statewide campaign focused on encouraging physicians, patients, and other health care stakeholders to think and talk about medical tests and procedures that may be unnecessary, and in some instances cause harm. Current efforts are using community navigators to improve newly-insured patient-understanding of how to use the health care system and avoiding unneeded care.

• All Payer Claims Database (APCD) Showcase Event

Action: COMPLETED Primary: Comagine Health, UDOH-OHCS

Goals/Objectives Supported: 4A

Yearly the Office of Healthcare Statistics and Comagine Health Partner to show the research abstracts that are coming from use of APCD data. Presenting and sharing success and barriers of the APCD data is a learning event for academic, public health, and healthcare improvement organizations.

• Utah Regional Health Care Innovation Day

Action: COMPLETED Primary: Comagine Health

Goals/Objectives Supported: 2B, 3A, 3F, 4C

The Utah Regional Health Care Innovation Day brings together health care professionals, payers, health care organizations, and state and federal government officials to discuss innovations to transform health care. During this event those working locally to improve health, provide care and lower costs through innovative strategies will share their vision, lessons learned and results. A one day planning session was held.

• Indian Health Geographic Analysis

Action: COMPLETED Primary: UDOH, UHIN

Goals/Objectives Supported: 2D, 3C

A state wide assessment of Indian health status using multiple state data bases for 3 use cases of Behavioral Health, Obesity Diabetes reduction, and End of Life care. This was completed by a student as part of the SIM Grant

• EHR Guide for Quality Reporting

Action: COMPLETED Primary: UDOH-EPICC, Comagine Health

Goals/Objectives Supported: 2A, 2C

Quality Data for Beginners: Using your Electronic Medical Record for Quality Reporting and Better Patient Care has been updated in 2017 to encompass cardiac measures and provides guidance for success in quality reporting for primary care practices. (Subcontract to Comagine Health, under UDOH CDC 1422 funding